Please print or type. (Form designed for use on elite (12-pitch) typewriter.)													-000-0009		
$ \uparrow $	٧	NASTE MANIFEST	Generator ID Number	CAD0083427	2. Page 1 of	1818)				055	010	8 F	LE		
	5. G	5. Generator's Name and Mailing Address AUTOMATION PLATING 927 THORIPSON AVE. Generator's Site Address (if different than mailing address)													
$\ \cdot\ $	Gen	GLENDALE, CA \$1201 818-241-2844 Generator's Phone:													
	6. Transporter 1 Company Name								U.S. EPA ID Number CAD980585293						
П	7. Tr	INDUSTRIAL WASTE UTILIZATION INC. 7. Transporter 2 Company Name								U.S. EPA ID Number					
	Designated Facility Name and Site Address								U.S. EPA ID Number						
	US ECOLOGY HWY 95 AT 11 Miles South of Beatty Facility's PROFEATTY, NV 89003 775-553-2203								NVT330010000						
	9a.	-i	on (including Proper Shippin	ding Proper Shipping Name, Hazard Class, ID Number,			10. Containers No. Type			11. Total 12. Unit Quantity Wt./Vol.			13. Waste Codes		
GENERATOR —	-	1. RQ, Hais (FOIS Title NAJOYT		7.0.5.		1/		BA	16	1 12 1	181 066	F006			
GENE		2.				1/2			- / -	í		1,2			
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	\vdash	4.	51,20	, (7 101	V 3	- 1	•	. : -						
				1>	, 6 1								·		
14. Special Handling Instructions and Additional Information 961 (11s)-F006 filter cake w/csdmlum/zinc/-Approval #07-012-8936 CMbic Jand 15 kg 5-															
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the parked and labeled/placarded, and are in all respects in proper condition for transport according to applicable integrational and national governmental representations. I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Cogsentation.											, and are clas ipment and l'a	sified, packa am the Prima	ged, Iry		
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. Generator's/Offeror's Printed/Typed Name Month												th Day	Year		
<u>↓</u>	16.	International Shipments'	51/00/			KACK			7		09	ith Day	10/		
INT.		nsporter signature (for expo			Export from		Port of entry/ Date leaving:					 -			
RTER	Tran:	Transporter Acknowledgmen sporter 1 Printed/Typed Nar		<u> </u>	Sig	nature		prom de	100	7	Mon	th Day	Year		
TR ANSPO	Tran	nsporter 2 Printed/Typed-Nai	OR ILL	-415	Sig	natúre /	,	1/1	The state of the s	<u>4 </u>	<u>ئے </u> Mon	th Day	Year		
TRA															
$ \uparrow$	\vdash	Discrepancy Discrepancy Indication Spa	ace Ourselle			Residue Partial Rejection Full Rejection									
Manifest Reference Number:										cuon Full Rejection					
										U.S. EPA ID Number					
FACI	Facility's Phone:														
18b. Alternate Facility (or Generator)								Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											1		1		
_ 	$\begin{bmatrix} 1 \\ 1 \end{bmatrix}$														
		D. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a rinted/Typed Name Signature Month Day Year											Year		
1 1	I														